

UTILITY PATENT APPLICATION
TRANSMITTAL

new nonprovisional applications under 37 CFR 1.53(b))

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NAME OF PERSON MAILING PAPER OR FEE: **Elsa Matos**

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Attorney Docket No. **P31167C1**

First Named Inventor **Bax et al.**

"EXPRESS MAIL CERTIFICATE"

Signature: **Elsa Matos**

U.S. PTO
JAN 22 2002
10/043437

APPLICATION ELEMENTS											
See MPEP chapter 600 concerning utility patent application contents.											
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 19-2570</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3)) (Submit an original, and a duplicate for fee processing)</p>	<p>7. <input checked="" type="checkbox"/> The Title of the Invention: Composition Comprising Amoxicillin and Clavulanic Acid</p>										
<p>2. <input checked="" type="checkbox"/> The total fee is calculated as shown below:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Basic Filing fee</td> <td style="width: 20%; text-align: right;">\$740.00</td> </tr> <tr> <td>Total Claims 18 - 20 = 0 x \$18</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>Independent Claims 3 - 3 = 0 x \$84</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>Multiple Dependent Claim present. \$280</td> <td></td> </tr> <tr> <td>TOTAL FILING FEE</td> <td style="text-align: right;">\$740.00</td> </tr> </table> <p>Cancel in this application original claims <u>1</u> to <u>31</u> of the prior application before calculating the filing fee.</p> <p>Charge \$740.00 to the above indicated Deposit Account.</p>	Basic Filing fee	\$740.00	Total Claims 18 - 20 = 0 x \$18	\$ 0.00	Independent Claims 3 - 3 = 0 x \$84	\$ 0.00	Multiple Dependent Claim present. \$280		TOTAL FILING FEE	\$740.00	<p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Copy</p> <p style="margin-left: 20px;">b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p style="margin-left: 20px;">d. <input type="checkbox"/> Use the identical computer-readable form filed in Application No. _____, filed _____, as the computer-readable form for the instant application. (37 CFR 1.821(e))</p>
Basic Filing fee	\$740.00										
Total Claims 18 - 20 = 0 x \$18	\$ 0.00										
Independent Claims 3 - 3 = 0 x \$84	\$ 0.00										
Multiple Dependent Claim present. \$280											
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<p>3a. <input checked="" type="checkbox"/> Specification excluding Drawings [Total Pages] <u>12</u></p> <p>3b. <input checked="" type="checkbox"/> Abstract on a separate sheet [Total Pages] <u>1</u></p> <p>3c. <input checked="" type="checkbox"/> WIPO cover sheet [Total Pages] <u>2</u></p>	<p>9. ACCOMPANYING APPLICATION PARTS</p> <p style="margin-left: 20px;">a. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)</p> <p style="margin-left: 20px;">b. <input checked="" type="checkbox"/> PTO-1449 (7 + 6 pages)</p> <p style="margin-left: 20px;">c. <input checked="" type="checkbox"/> Copies of all IDS Citations not already cited.</p>										
<p>4. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] _____</p>	<p>10. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p>										
<p>5. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages] <u>4</u></p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17a completed)</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Unsigned Declaration</p> <p style="margin-left: 40px;">[Note Box 6 below]</p> <p style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S)</p> <p style="margin-left: 40px;">Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p>	<p>11. <input checked="" type="checkbox"/> Prior Application is Assigned to: <u>SmithKline Beecham P.L.C.</u> (for continuation/divisional with Box 17a completed)</p>										
<p>6. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 5b is checked)</p> <p>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>12. <input checked="" type="checkbox"/> Preliminary Amendment [Total Pages] <u>8</u></p>										
<p>17. <input checked="" type="checkbox"/> Priority Information, check appropriate box and supply the requisite information</p> <p>a. The accompanying application is a <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: 08/945,365 filed 1/9/98 which is a \$371 national stage entry of International Application PCT/EP96/01881 filed 5/2/96 which claims priority from the following foreign applications: 9508989.2 filed 5/3/95 and 9523655.0 filed 11/18/95.</p> <p>b. <input type="checkbox"/> Benefit is claimed under Title 35, United States Code, Section 119(e) of the following Provisional Applications: Application No. _____ filed _____</p> <p>c. <input checked="" type="checkbox"/> Please amend the specification by inserting before the first line the sentence: (37 CFR 1.78) This is a continuation of prior application No: 08/945,365 filed 1/9/98, which is a \$371 national stage entry of International Application PCT/EP96/01881 filed 5/2/96.</p>											
<p>Correspondence Address:</p> <p>GLAXOSMITHKLINE Corporate Intellectual Property - UW2220 P.O. Box 1539 King of Prussia, PA 19406-0939</p> <p>Telephone (610) 270-5017 Fax (610) 270-5090</p>	<p>Respectfully Submitted,</p> <p style="text-align: center;">Signature Name <u>Dara L. Dinner</u></p> <p>Registration No. <u>33,680</u></p>										

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